

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------|--------------|---------|
| FEE DETERMINATION | <i>dm. G</i> | | 4/27/00 |
| O.I.P.E. CLASSIFIER | | <i>12</i> | 5/2 |
| FORMALITY REVIEW | <i>NH</i> | <i>617</i> | 6-20-00 |
| RESPONSE FORMALITY REVIEW | | <i>64149</i> | 12-10 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 1 | 01/06/00 |
| 2 | 02/07/00 |
| 3 | 3/16/00 |
| 4 | 4/27/00 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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